



# RETURN OF PERSONAL PROPERTY IN WAREHOUSES, GRAIN ELEVATORS OR OTHER STORAGE PLACES (Claimed To Be Exempt From Assessment)

State Form 22666 (R9 / 1-03)

Prescribed by the Department of Local Government Finance

**FORM  
103-W**

March 1, 20\_\_\_\_\_

For Assessor's use only

## PRIVACY NOTICE

The records in this series are  
confidential according to I.C.  
6.1-1-35-9.

**INSTRUCTIONS:** Attach to and file with Form 103.

Name of taxpayer (please print or type)		County	Taxing district
Address where property is located (number and street, city or town, state, ZIP code)			
Pursuant to I.C. 6-1.1-10-29, 29.3, 29.5, 30, 30.5 and 31 and Regulation 16, Rule 12, Section 3, 4 and 8, report below all personal property in warehouses, grain elevators, or other storage places in Indiana on March 1, of the current assessment year, or if electing the calendar year average basis ( <i>Rule 5, Section 9</i> ) the personal property on hand in said storage facilities on the first day of each calendar month of the prior calendar year, which you claim is exempt from assessment.			
Check the terms that apply: <input type="checkbox"/> Resident <input type="checkbox"/> Non-resident <input type="checkbox"/> Public Warehouse <input type="checkbox"/> Private Warehouse <input type="checkbox"/> Regular Warehouse <input type="checkbox"/> Goods are repackaged <input type="checkbox"/> Goods will be processed further at this location <input type="checkbox"/> Goods are stored and remain in original package ( <i>as defined</i> ) <input type="checkbox"/> Goods are stored in more than one (1) warehouse ( <i>separate ratio required for each warehouse</i> ) <input type="checkbox"/> Non-resident Auto Dealer <input type="checkbox"/> Accepted purchase order(s) as of March 1 <input type="checkbox"/> Manufacturer or Processor <input type="checkbox"/> Finished <input type="checkbox"/> Ready for shipment			
State the value of shipments from this warehouse location: (During prior year ending with assessment date.)	Out of state shipments	Total shipments	Ratio %
Specific statute ( <i>and regulation</i> ) exemption is claimed under: <input type="checkbox"/> 6-1.1-10-29 [Regulation 16, Rule 12, Section 3 (a)] <input type="checkbox"/> 6-1.1-10-30 (d) [Regulation 16, Rule 12, Section 4] <input type="checkbox"/> 6-1.1-10-31.4 <input type="checkbox"/> 6-1.1-10-29(b)(2) <input type="checkbox"/> 6-1.1-10-30.5 [Regulation 16, Rule 12, Section 3 (e)] <input type="checkbox"/> 6-1.1-10-31.6 <input type="checkbox"/> 6-1.1-10-29.3 [Regulation 16, Rule 12, Section 3 (b)] <input type="checkbox"/> 6-1.1-10-31.5 <input type="checkbox"/> 6-1.1-10-30 (a) [Regulation 16, Rule 12, Section 3 (b)] <input type="checkbox"/> 6-1.1-10-40 <input type="checkbox"/> 6-1.1-10-30 (b) [Regulation 16, Rule 12, Section 3 (c)] <input type="checkbox"/> Government owned (Regulation 16, Rule 12, Section 8) <input type="checkbox"/> 6-1.1-10-30 (c) [Regulation 16, Rule 12, Section 3 (d)]			
NAME AND ADDRESS OF WAREHOUSE	POINT OF ORIGIN	POINT OF DESTINATION	TOTAL COST
			\$
			\$
			\$
			\$
			\$
			\$
( If necessary attach additional sheet Form 103-Ws)		TOTAL COST AS SHOWN ON LINE 19, SCHEDULE B, FORM103	
Under the penalties of perjury, I hereby certify that this return to the best of my knowledge and belief, is true, correct, and complete; and reports the total cost of all personal property claimed by the taxpayer to be exempt from assessment and taxation pursuant to I.C. 6-1.1, et seq., as amended.			
Signature of authorized person		Title	Date
Signature of person preparing return			Date